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REISSUE APPLICATION DECLARATION BY THE INVENTOR

Docket Number (Optional) 0 6 5 6 - 0 0 8 U S 6

As a below named inventor, I hereby declare that: My residence, mailing address and citizenship are stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is described and claimed in patent number 6,180,395,grantedJanuary 30, 2001, and for which a							
reissue patent is sought on the invention entitled REAGENT CHAMBER FOR TEST APPARATUS AND							
TEST APPARATUS							
the specification of which							
🗓 is attached hereto.							
was filed onas reissue application number/_							
and was amended on (If applicable)							
(If applicable)							
I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56. I verily believe the original patent to be wholly or partly inoperative or invalid, for the reasons described below. (Check all boxes that apply.)							
by reason of a defective specification or drawing.							
x by reason of the patentee claiming more or less than he had the right to claim in the patent.							
by reason of other errors.							
At least one error upon which reissue is based is described below. If the reissue is a broadening reissue, such must be stated with an explanation as to the nature of the broadening:							
Reissue is sought to broaden claims 1, 10, 14, 19, 21, and 23 by removing the word "tablet," so as to clarify that the recited reagent composition(s) may be in any of the forms supported by the specification. See, e.g., column 3, lines 62-65 ("which may be solid, liquid, powder, emulsion, suspension, tablet or substantially any combination separately or admixtured thereof.").							
It is believed that the unnecessary recitation of the term "tablet" in each of claims 1, 10, 14, 19, 21, and 23, was an error made without deceptive intent.							

PTO/SB/51 (02-01)

Approved for use through 01/31/2004. OMB 0651-0033

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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(REISSUE APPLICATION DECLARATION BY THE INVENTOR, page 2)					Docket Number (Optional) 0656-008US6		
All errors corrected in this reissue application arose without any deceptive intention on the part of the applicant. As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the United States Patent and Trademark Office connected therewith.							
Name(s) Registration Number							
Leslie Meyer-Leon, Registration No. 37,381							
Correspondence Address: Direct all communications about the application to:							
Customer Nu	here Place Customer Number Bar Code Label here						
Firm or Leslie Meyer-Leon, IP Legal Strategies Group P.C.							
Address	ddress 901 Main Street						
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City	Osterville	State	MA Zip 02655-0280			02655-0280	
Country	USA						
Telephone	(508) 428-4000	Fax	(508) 428-1900				
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine and imprisonment, or both, under 18 U.S.C. 1001, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this declaration is directed. Full name of sole or first inventor (given name, family name) Richard T. Skiffington							
Inventor's signature	Date						
Residence	Citizenship						
35 Pleasant At., N. Reading, MA 01864 US Mailing Address							
Full name of second joint inventor (given name, family name) Eliezer Zomer							
Inventor's signature Date 11/2 8/21							
Residence 374 Kenrick	Citizenship U.5						
Mailing Address 374 Kenrick St., Newton, MA 02158							
Full name of third joint inventor (given name, family name)							
Inventor's signature	Date						
Residence	Citizenship						
Mailing Address							
Additional joint inventors are named on separately numbered sheets attached hereto.							